

Addendum to First Steps Policy & Procedure Manual
Relates to: VI IFSP – 911 KAR 2:200 Section 4
May 17, 2005_(rev.)

Payment for Services Beyond the Limits

Payor of Last Resort

WHEN:

Prior to pursuing a Record Review to exceed limits (96/144) all other payor sources MUST be explored. (i.e. Medical Assistance Programs, Private Insurance, Commission for Children with Special Health Care Needs)

1. PSC and family will discuss other possible payor sources.
2. Family will call their doctor/or Commission to see about referrals when appropriate.
3. If family chooses (it is not a requirement) to use their private insurance, providers must bill. (Per 911 KAR 2:200
4. If insurance or Medical Assistance Programs denies, family must give PSC a copy of denial letter in order to submit with Record Review Request. If family does not have letter, PSC will document on Payor of Last Resort Form (form 19) conversation with family and date of denial. (The family will not usually receive a written denial from the Commission if they are not eligible, document on form date of request).
5. If there are no other payor sources then the IFSP team can proceed with Record Review Process to Exceed Authorized Units.

Record Review Process to Exceed Limits

WHEN:

The IFSP process should include all the services recommended by the team. In order to be prepared to implement the recommended IFSP on the effective date, please use the following guidelines:

I. For initial IFSP:

1. The initial IFSP should include the services allowed without prior authorization (96/144 units) with service start dates and frequency and intensity listed to meet the pre-authorized amount so that those services can start immediately and continue for six (6) months.
2. If the team is recommending more than the preauthorized amount, they need to send that request for those additional units to Record Review as outlined in the **HOW** section of this policy.
3. If the Record Review Team recommends the total request, the team has an amendment meeting to add the units they requested.

Addendum to First Steps Policy & Procedure Manual

Relates to: VI IFSP – 911 KAR 2:200 Section 4

May 17, 2005_(rev.)

4. If the Record Review Team has different recommendations and the team agrees with those, the IFSP team has an amendment meeting to add the units Record Review recommended. If the team does not agree with the recommendation they use the reconsideration process ("see HOW III" within this policy).
5. If the IFSP Team agrees with the reconsideration recommendations, they have an amendment meeting to add the units that reconsideration recommended. If the team does not agree with the reconsideration recommendation, they must request that the Part C Coordinator attend the IFSP to work out final recommendations (see "HOW III 3." within this policy).
6. Once the final number of units is determined, send the following to CBIS:
 - a. IFSP Summary Sheet Amendment/Correction Form (with the TOTAL number of units for the entire plan period. The "Effective Date" is the Amendment Meeting Date), and
 - b. The Record Review Form with recommended units, or
 - c. The Reconsideration letter from the Department for Public Health.

II. For existing IFSP:

A. IFSP due to expire in one month

1. The IFSP team must meet in **enough time** to plan the next 6 month plan with all services, recommended units, frequency's, etc and have those approved and in place before the current IFSP expires. We suggest **at least 4 weeks** prior to the start of the next plan period. (Write the plan for the total units the team thinks the child needs).
2. The IFSP team will send in their requests for more units to the Record Review Team. If the Record Review Team recommends the total request, the plan is ready to implement on the start date.
3. If the Record Review Team has different recommendations and the IFSP team agrees, then the team must have an amendment meeting to make those recommended changes and shall do that in time to be able to start the plan on the start date.
4. If the Record Review Team has different recommendations and the IFSP team disagrees and uses the reconsideration process (letter to Part C Coordinator – see "HOW section III within this policy), and then agrees with the reconsideration recommendations, then the IFSP team must have an amendment meeting to make those changes.
5. If the IFSP team disagrees with the reconsideration recommendations, then the team must request that the Part C Coordinator attend the IFSP to work out final recommendations (see "HOW III 3." Within this policy). This must be done **before** the existing plan expires and the new one is to go into effect.
6. Once the final number of units is determined, send the following to CBIS:

Addendum to First Steps Policy & Procedure Manual

Relates to: VI IFSP – 911 KAR 2:200 Section 4

May 17, 2005(rev.)

- a. IFSP Meeting Summary Sheet Services Form (with the TOTAL number of units for the entire plan period), and
- b. The Record Review Form with recommended units, or
- c. The Reconsideration letter from the Department for Public Health

B. Existing IFSP due to expire in less than one month...maybe not enough time to go through the Record Review Process

1. If circumstances will not allow the IFSP meeting to convene in enough time (these should be rare and only family driven reasons) for the Record Review Process to be completed, then the IFSP team should plan for only the allowable pre-authorized number of units (**96/144**) to be spread over the six (6) month period and start the plan on the start date. The PSC shall send the IFSP Meeting Summary Sheet Service Form to CBIS as usual.
2. Meanwhile, the team shall send the required information to request a Record Review on additional units. [The team cannot assume they will get those units and they must start the new plan with what they are authorized (**96/144**) and plan on only that number for the six months. They can only add more units once they have gone through the authorization process. It is important to remember that the Record Review authorizes units based on a 6-month plan. *(For example if the Record Review Recommends 48 total units for PT and the PT has used 8 units before the recommendation is received, the PT will have 40 units for the remainder of the plan.)* This is why we stress that the team plans in enough time to go through the complete process before the current plan expires. We also stress that PSC's clearly explain the process to the families so they will understand what could happen if the IFSP planning meeting can not be held in enough time.]
3. If the Record Review Team recommends the total request, the team has an amendment meeting to add the units they requested.
4. If the Record Review Team has different recommendations and the team agrees with those, the IFSP team has an amendment meeting to add the units Record Review recommended. If the team does not agree with the recommendation they use the reconsideration process ("see HOW III" within this policy).
5. If the IFSP Team agrees with the reconsideration recommendations, they have an amendment meeting to add the units that reconsideration recommended. If the team does not agree with the reconsideration recommendation, they must request that the Part C Coordinator attend the IFSP to work out final recommendations (see "HOW III 3." within this policy).
6. Once the final number of units is determined, send the following to CBIS:
 - a. IFSP Summary Sheet Amendment/Correction Form (with the TOTAL number of units for the entire plan period. The "Effective Date" is the Amendment Meeting Date), and

Addendum to First Steps Policy & Procedure Manual

Relates to: VI IFSP – 911 KAR 2:200 Section 4

May 17, 2005(rev.)

- b. The Record Review Form with recommended units, or
- c. The Reconsideration letter from the Department for Public Health.

C. Existing IFSP 1, 2, 3, 4, or 5 months into the plan...IFSP team is requesting Record Review Process to add units to the current plan (this should be rare and only child/family driven).

1. When a concern/need is identified that will require extra units for an additional team member or more units for an existing team member, the IFSP team must have an amendment meeting to discuss what their new recommendations are for the child.
2. The IFSP team then sends the required information to Record Review to request additional units. (The team cannot assume they will get those units and the must continue the plan with what they are authorized **(96/144)**. They can only add more units once they have gone through the authorization process. At this time it may be necessary adjust the number of units left in the plan, so all needs/concerns are being met.) It is important to remember that the Record Review authorizes units based on a 6-month plan. *(For example if the Record Review Recommends 48 total units for PT and the PT has used 8 units before the recommendation is received, the PT will have 40 units for the remainder of the plan.)*
3. If the Record Review recommends the total request, the team has an amendment meeting to add the units they requested.
4. If the Record Review Team has different recommendations and the team agrees with those, the IFSP team has an amendment meeting to add the units Record Review recommended. If the team does not agree with the recommendation they use the reconsideration process ("see HOW III" within this policy).
5. If the IFSP Team agrees with the reconsideration recommendations, they have an amendment meeting to add the units that reconsideration recommended. If the team does not agree with the reconsideration recommendation, they must request that the Part C Coordinator attend the IFSP to work out final recommendations (see "HOW III 3." within this policy).
6. Once the final number of units is determined, send the following to CBIS:
 - a. IFSP Summary Sheet Amendment/Correction Form (with the TOTAL number of units for the entire plan period. The "Effective Date" is the Amendment Meeting Date), and
 - b. The Record Review Form with recommended units, or
 - c. The Reconsideration letter from the Department for Public Health.

Addendum to First Steps Policy & Procedure Manual
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May 17, 2005_(rev.)

HOW:

Procedure:

I. Permission to exceed the Therapeutic Intervention and Group units per plan request:

1. To request payment to exceed the units per plan, the Service Coordinator shall work with the family and other providers to complete the First Steps Service Exception Record Review Form (Form 18) which **replaces** the service exception request as stated in 911 KAR 2:200 Section 4 (1)(a)1-6; and
2. Attach the following to the Form:
 - a. Primary Level Evaluation Report and the medical component as described in 911 KAR 2:200 Section 4 (b);
 - b. Available Assessment Reports done in the last twelve (12) months;
 - c. Available IFSPs and Amendments from the last twelve (12) months;
 - d. Most recent progress reports. Reports older than three (3) months shall include an addendum reflecting current progress;
 - e. Therapeutic staff notes from the previous two months;
 - f. Payor of Last Resort Form (Form 19);
 - g. Transfer of Skills Form (Form 20);
 - h. Service Planning Activity Matrix Form (Form 21);
 - i. If requesting a record review for a child who is receiving speech Therapy, a hearing evaluation performed by an Audiologist within six (6) months of the request.
 - j. If available, birth records, if neonatal or prenatal complications occurred;
 - k. If available, general pediatric records from the primary pediatrician;
 - l. If available, medical records from hospitalizations; and
 - m. If available, records from medical subspecialty consultants, such as neurology, orthopedic, gastroenterology or ophthalmology.
 - n. If applicable, the Intensive Level Evaluation Report
3. Send the Form and the attached information to: Weisskopf Child Evaluation Center, University of Louisville - HSC, Attn: Theresa James/Record Review Committee, 571 South Floyd Street, Suite 100, Louisville, KY 40202, OR in emergency cases by fax to (502) 852-0434.
4. Send the required information to arrive by the close of business on Mondays. Records that are complete with all the above information will be reviewed at the Record Review Meeting that Friday.
5. Receive a written response with Record Review decision by the following Friday.
6. When submitting a Record Review on a child for the second consecutive time, only the following information needs to be submitted:
 - a. First Steps Service Exception Record Review Form (Form 18) which **replaces** the service exception request as stated in 911 KAR 2:200 Section 4 (1)(a)1-6;

Addendum to First Steps Policy & Procedure Manual

Relates to: VI IFSP – 911 KAR 2:200 Section 4

May 17, 2005_(rev.)

- b. Updated therapeutic staff notes from the previous two months and
- c. The 6-month IFSP progress reports.
- d. Updated Activity Matrix & Transfer of Skills forms (Forms 20 & 21)

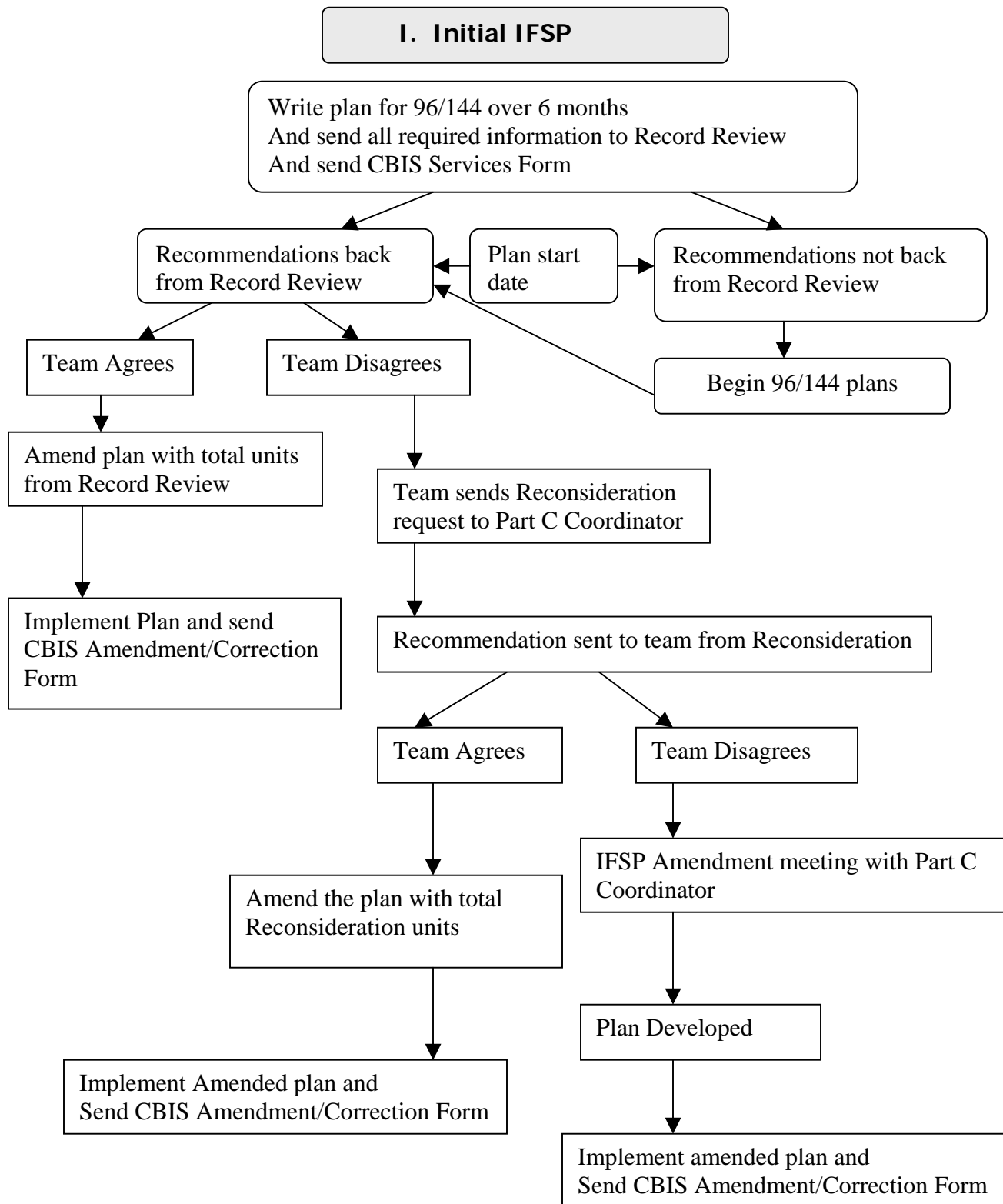
II. Permission to exceed the service coordination units per plan:

1. Complete and send First Steps Service Exception Record Review Form (Form 18) including the number of additional units requested and the rationale for the request; and
2. Attach the following:
 - a. A copy of the current IFSP;
 - b. A detailed description of how and when the additional units are to be used; and
3. Send the Form and the attached information to: Weisskopf Child Evaluation Center, University of Louisville - HSC, Attn: Theresa James/Record Review Committee, 571 South Floyd Street, Suite 100, Louisville, KY 40202, OR in emergency cases by fax to (502) 852-0434.
4. Send the required information to arrive by the close of business on Mondays to be reviewed at the Record Review Meeting that Friday.
5. Receive a written response with Record Review decision by the following Friday.

III. To have the Record Review Decision Reconsidered:

1. Write or Fax to the Part C Coordinator (First Steps Part C Coordinator; DPH/Division of Adult and Child Health Improvements; 275 East Main St. HS2W-C; Frankfort, KY 40621) (fax 502-564-8389) a statement of specifically what services are being requested, the reason for reconsideration, any additional information justifying the reconsideration, and a copy of the Record Review Report. Include in the statement the fax or mailing address where the written reconsideration recommendations should be sent.
2. The Department for Public Health will have a 3-person team review the request, consult with the Record Review Team and send a written decision to the identified person within five (5) working days of the receipt of the request for reconsideration.
3. If the IFSP team still disagrees with the written reconsideration decision, then the IFSP team may request to have an IFSP meeting with the Part C Coordinator or their designee, and a representative from the Record Review Team (at least by phone).

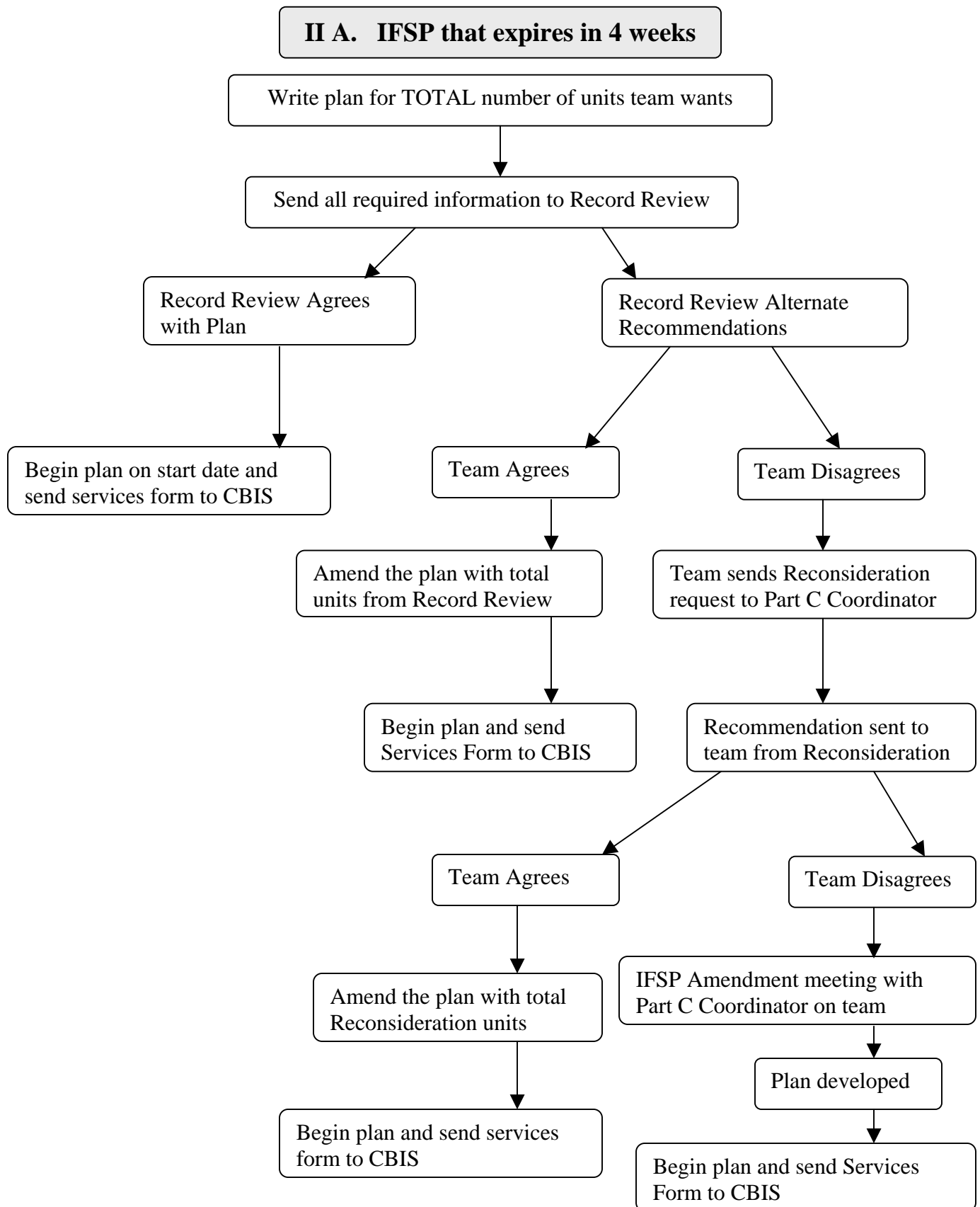
IV. In order to request that the Part C Coordinator and the Record Review Team representative attend the IFSP meeting call 502-564-3756.



* For complete details refer to: Pages 1-6 of “Addendum to First Steps Policy & Procedure Manual. Relates to: VI IFSP – 911 KAR 2:200 Section 4.

Record Review to Exceed Limits Flow Charts

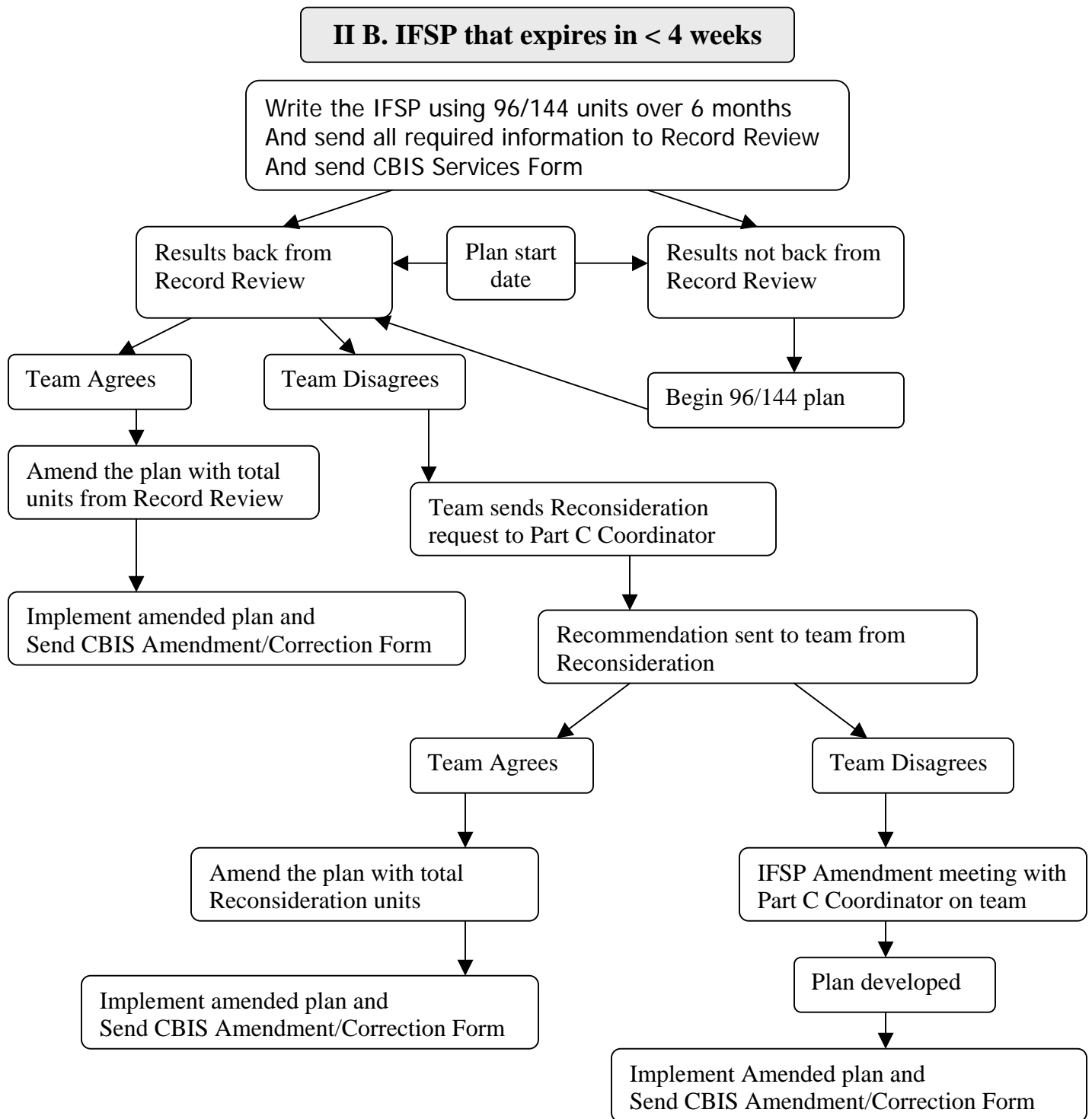
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Record Review to Exceed Limits Flow Charts

9



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